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In the Paperwork Reduction Act of 1895, fio persons are required to respond to a collection of Information unless it displays a yallo OMB control number. PATENT APPLICATION FEE DETERMINATION RESIGNATION uplication of Docket Humber Substitute for Form PTO-876 APPLICATION AS FILED - PART I (Column 1) OTHER THAN SMALL ENTITY (Column 2) .OR SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA BABIQ FEE (\$7 OFR 1.16(a),(b); or (c)) RATE (\$) FEE (\$) RATE (\$) N/A FEE (\$) . NA · . N/A BEAROH FEE N/A (87 CFR 7.16(N), (D, or (my) N/A N/A EXAMINATION FEE (87 OFR 1.16(0), (p), or (q)) N/A N/A N/A N/A: ŃΑ BMIALO JATOT N/A (37 CFR 1.16(1)) mlnus 20 = 26. INDEPENDENT OLAIMS OR 50 (37 OFR 1.16(h)) minus 9. = x 105 If the specification and drawings exceed 100 210. sheets of paper, the application size fee due is \$260 (\$130 for small entity) for each APPLICATION SIZE FEE (37 CFR 1.16(s)) additional 50 sheets or traction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(1)) 185 370 f the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II (Column 1) (Column 2) OTHER THAN. (Column 3) OR SMALL ENTITY CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE (\$) . AFTER ADDI-PREVIOUSLY PAID FOR EXTRA RATE (\$) ADDI-TIONAL FEE (\$) Total DI FEE (\$) Minus x 25 ÖR 50 Independent Of OFR 1.16(h)) Minus x 105 = Application Size Fee (37 CFR 1.16(s)) 210 = ÖR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(II) 185 3,70 OR: TOTAL ADD'L FEE TOTAL ADD'L FEE OR (Column 1) (Column 2) (Columni 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE (\$) ADDI-TIONAL FEE (\$) AFTER AMENDMENT PREVIOUSLY RATE (\$) ADDI-EXTRA TIONAL FEE (\$) PAID FOR Total (37 CFR 1.160)) Minus ÷ x 25 x 50 independent (27 OFA: 1.16(h)). Minus x 105 = Application Size Fee (37 CFR: 1.16(s)) $\times 210 =$ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (81 OFR 1.16(1)) 185 370 OŔ ! If the entry in column 1 is less than the entry in column 2, write "o" in column 3.

"If the Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

This Wileflow of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submittling the completed application on the amount of time you require to complete this form and/or suggestions for reducing think with the periodic property on the Individual case. Any comments and Tradement Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

**Additional Commerce of Patents, P.O. Box 1450, Alexandria, VA 22313-1450. TOTAL "ADD'L FEE TOTAL

ll you need assistance in completting the form, ball 1-800-PTO-8188 and select option 2.